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# **REVOCATION OF POWER OF ATTORNEY and APPOINTMENT OF NEW POWER OF ATTORNEY**

Application Number	
Filing Date	
First Named Inventor	Modesto M. PESAVENTO
Art Unit	
Examiner Name	
Attorney Docket Number	213201.00226

I hereby revoke all previous powers of attorney given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners at Customer Number:

27160

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number:

27160

OR


<input type="checkbox"/> Firm or Individual Name				
Address				
Address				
City				
Country		State		Zip
Telephone		Fax		

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## **SIGNATURE of Applicant or Assignee of Record**

Name	Michael P.J. McKendry General Counsel		
Signature			
Date	September 13, 2004	Telephone	905 951-5173

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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**STATEMENT UNDER 37 CFR 3.73(b)**

**Applicant/Patent Owner:** Modesto M. PESAVENTO

**Application/Patent No.** \_\_\_\_\_ **Filed:** \_\_\_\_\_

**Entitled:** METHOD AND DEVICE FOR PROCESSING PREFORMS

**Husky Injection Molding Systems Ltd.**, a **corporation**  
(Name of Assignee) (Type of Assignee - corporation, partnership, university, gov't agency, etc.)

**STATE THAT IT IS:**

1. ☒ the assignee of the entire right, title, and interest ; or
2. ☐ an assignee of less than the entire right, title and interest. The extent of its ownership interest is \_\_\_\_\_% (by percentage)

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the U. S. Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

**OR**

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the U. S. Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

2. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the U. S. Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

3. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the U. S. Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

☐ Copies of assignments or other documents in the chain of title are attached.

**NOTE:** A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to the Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Date: September 13, 2004 Typed or printed name:

Michael P.J. McKendry  
General Counsel

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>		Attorney Docket No. <b>213201.00226</b>			
		First Named Inventor <b>Modesto M. PESAVENTO</b>			
		COMPLETE IF KNOWN			
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing. Surcharge under 37 CFR 1.16(e) required.	Application Number		<b>unassigned</b>		
	Filing Date		<b>unassigned</b>		
	Art Unit		<b>unassigned</b>		
	Examiner Name		<b>unassigned</b>		
<b>AS THE BELOW NAMED INVENTOR, I HEREBY DECLARE THAT:</b>					
My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:					
<b>METHOD AND DEVICE FOR PROCESSING PREFORMS</b>					
<input checked="" type="checkbox"/> is attached hereto or <input type="checkbox"/> was filed on (MM/DD/YYYY) <span style="border: 1px solid black; display: inline-block; width: 150px; height: 40px; vertical-align: middle;"></span> as United States Application Number or PCT International					
Application Number <span style="border: 1px solid black; display: inline-block; width: 100px; height: 25px; vertical-align: middle;"></span> and was amended on (MM/DD/YYYY) <span style="border: 1px solid black; display: inline-block; width: 100px; height: 25px; vertical-align: middle;"></span> (if applicable).					
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.					
<b>PRIORITY INFORMATION:</b>					
I hereby claim domestic priority benefits under 35 USC 119(e) of any provisional application listed below. I hereby claim domestic priority benefits under 35 USC 120 of any United States application, or 365(c) of any PCT international application designating the United States listed below. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application for patent, inventor's or plant breeder's rights certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Domestic or Foreign Application Number(s)	Country	Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? (for FOREIGN only)	
				YES	NO
<b>WO 03/086728 A1 (PCT/DE03/01202)</b>	<b>WO</b>	<b>10/23/2003</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> ___ additional application numbers are listed on a supplemental priority data sheet attached hereto.					

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DECLARATION – UTILITY OR DESIGN PATENT APPLICATION			
<b>CORRESPONDENCE ADDRESS:</b>			
Direct all correspondence to:	<input checked="" type="checkbox"/> Customer Number or Bar Code Label	<b>27160</b>	or <input type="checkbox"/> Correspondence address below
Name			
Address			
City		State	Zip
Country	Telephone		Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
<b>NAME OF SOLE OR FIRST INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle): <b>Modesto M.</b>		Family Name or Surname: <b>PESAVENTO</b>	
Inventor's Signature: <i>[Signature]</i>		Date: <i>August 5th 2009</i>	
<b>Residence:</b>			
City <b>Schmalkalden</b>	State <b>Th</b>	Country <b>Germany</b>	Citizenship <b>Germany</b>
<b>Mailing Address:</b>			
Street <b>Am Neuen Teich 10 a</b>			
City <b>Schmalkalden</b>	State	Zip <b>98574</b>	Country <b>Germany</b>